U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No.	1660-0	8000	
C	D /	1104	-

mportant: resta ti	ie instructions on pages 1–9.	Expiration Date: July 31, 2015
SECTION A	FOR INSURANCE COMPANY USE	
A1. Building Owner's Name Donald R. Wheeler	Policy Number	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No	Company NAIC Number	
129 Hartsie  City Waveland	State MS ZIP Code 39576	
* 1 00000000000000000000000000000000000	energy to the accordance in the second secon	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, 161E-0-02-327.000	Legal Description, etc.)	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessor A5. Latitude/Longitude: Lat. 30.282378 Long. 89.372469 Horizontal	Datum: ☐ NAD 1927 ☒ NAD 1983	
A6. Attach at least 2 photographs of the building if the Certificate is bein A7. Building Diagram Number 5	ng used to obtain flood insurance,	
A8. For a building with a crawispace or enclosure(s);	A9. For a building with an att	ached garage:
a) Square footage of crawlepace or enclosure(s)     Number of permanent flood openings in the crawlepace	sq ft a) Square footage of at	tached garage N/A sq ft
or enclosure(s) within 1.0 foot above adjacent grade N/A	within 1.0 foot above	nt flood openings in the attached garage adjacent grade N/A
c) Total net area of flood openings in A8.b	sq in c) Total net area of floo	d openings in A9.b N/A sq In
d) Engineered flood openings?   Yes   No	d) Engineered flood ope	enings? Yes No
	ANCE RATE MAP (FIRM) INFORMATION	ON
B1. NFIP Community Name & Community Number B2. Cou City of Waveland Mississippi 285262 Hancoc	unty Name	B3, State
		Mississippi
B4. Map/Panel Number B5. Suffix B6. FIRM Index Date 10/16/09	B7. FIRM Panel B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 20
310. Indicate the source of the Base Flood Elevation (BFE) data or base	flood depth entered in Item B9.	
☐ FIS Profile ☐ FIRM ☐ Community Determined	Other/Source: DFIRM	
311. Indicate elevation datum used for BFE in Item B9: NGVD 1929	NAVD 1988 ☐ Other/Source	<u> </u>
312. Is the building located in a Coastal Barrier Resources System (CBR: Designation Date: N/A	BRS OPA	
SECTION C - BUILDING ELEVA	TION INFORMATION (SURVEY REQUI	RED)
21. Building elevations are based on:   *A new Floreston Configure will be a seried to be struction Drawings*	☐ Building Under Construction*	☐ Finished Construction
*A new Elevation Certificate will be required when construction of the l 22. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (w below according to the building diagram specified in Item A7. In Puertic	VITA BEE) AR ARIA ARIAS ARIA1_ASO AR	/AH, AR/AO. Complete Items C2.a-h
Benchmark Utilized: <u>8H0962</u> Vertical	al Datum: NAVD88	
Indicate elevation datum used for the elevations in items a) through h) Datum used for building elevations must be the same as that used for	helow D NGVD 1929 NAVD 1988 D	Other/Source:
	Chec	k the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure f	floor) <u>24.3</u>	☑ feet ☐ meters
b) Top of the next higher floor	<u>N/A</u>	☐ feet ☐ meters
Bottom of the lowest horizontal structural member (V Zones only)     Attached garage (top of slab)	23.0	☑ feet ☐ meters
e) Lowest elevation of machinery or equipment servicing the building	<u>N/A</u> 24.0	☐ feet ☐ meters  ☑ feet ☐ meters
(Describe type of equipment and location in Comments)  f) Lowest adjacent (finished) grade next to building (LAG)	445	84
g) Highest adjacent (finished) grade next to building (HAG)	<u>14.2</u> 14.3.	☑ feet ☐ meters ☑ feet ☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including	g structural support 14.8	☑ feet ☐ meters ☑ feet ☐ meters
	INEER, OR ARCHITECT CERTIFICATION	
This certification is to be signed and sealed by a land surveyor engineer	or architect authorized by law to certify claust	
information. I certify that the information on this Certificate represents my l	best efforts to interpret the data available	WILLIAM.
I understand that any false statement may be punishable by fine or imprison.  Check here if comments are provided on back of form.  Were lati		Signal Process
	itude and longitude in Section A provided by a land surveyor?	
Certifier's Name Stuart Williamson, PE, CFM	License Number 13199	
Title Civil Engineer Company Name Stuart Willi		19199
Address P.O. Box 3145 City Bay St. Louis	State MS ZIP Code 39521	ATE OF MININGS PROPERTY
Signature Date 5/3/15	Telephone (228) 243-4066	OF MISSISSIVE

ELEVATION CERTIFICAT	E, page 2		
IMPORTANT: In these space	ces, copy the corresponding information from Sec	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (Includin 129 Hartsie	ng Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box	No.	Policy Number:
City Waveland	State MS ZIP (	Code 39576	Company NAIC Number
SEC	TION D - SURVEYOR, ENGINEER, OR ARCHITEC	CERTIFICATIO	N (CONTINUED)
Copy both sides of this Elevation	Certificate for (1) community official, (2) insurance agent/co	mpany, and (3) buil	ding owner.
Comments Minispike In Powerp	oole directly across Street from property = 15.22 NAVD 88		
0			
Signature Signature	Date 5/3/1:	5	
SECTION E - BUILDING	ELEVATION INFORMATION (SURVEY NOT REQU	IDEN) EOD ZONI	E AO AND ZONE A MATHOUT DEEL
For Zones AO and A (without BF and C. For Items E1-E4, use nate	E), complete Items E1-E5. If the Certificate is Intended to si tural grade, if available. Check the measurement used. In Po	upport a LOMA or Luerto Rico only ente	OMR-F request, complete Sections A, B,
E1. Provide elevation information	on for the following and check the appropriate boxes to show		
grade (HAG) and the lowes  a) Top of bottom floor (incli	st adjacent grade (LAG).  uding basement, crawispace, or enclosure) is	☐ feet ☐ met	ters 🔲 above or 🔲 below the HAG.
b) Top of bottom floor (Incl.	uding basement, crawlapace, or enclosure) is	☐ feet ☐ met	ters  ahove or  helow the LAC
E2. For Building Diagrams 6–9 (elevation C2.b in the diagr	with permanent flood openings provided in Section A Items ams) of the building is feet meters	8 and/or 9 (see pag	es 8-9 of Instructions), the next higher floor
E3. Attached garage (top of sia	b) is lb) is lb feet lb meters lb above or [	below the HAG.	
E4. Top of platform of machine	ry and/or equipment servicing the building is	☐ feet ☐ meters	☐ above or ☐ below the HAG.
ordinance? Yes N	lepth number is avallable, is the top of the bottom floor eleva lo 🏻 Unknown. The local official must certify this informati	ited in accordance v	vith the community's floodplain management
	TION F - PROPERTY OWNER (OR OWNER'S REPR		ERTIFICATION
	nthorized representative who completes Sections A, B, and E		
or Zone AO must sign here. The s	statements in Sections A, B, and E are correct to the best of	my knowledge.	ta i Ellyt-ibages of community-issued br ej
Property Owner's or Owner's Auth	norized Representative's Name		
Address	City	S	tate ZIP Code
Signature	Date	Te	elephone
Comments		<b></b>	
			C Observation of the
	OF ATTOMATION OF THE PROPERTY		Check here if attachment
ne local official who is authorized by	SECTION G – COMMUNITY INFORMATION IN SECTION G – COMMUNITY INFORMATION IN INFORMA		and any market Continue A. P. O. (as E)
this Elevation Certificate. Complete	e the applicable item(s) and sign below. Check the measurem	ent used in Items G	B-G10. In Puerto Rico only, enter meters,
1.   The Information in Section	n C was taken from other documentation that has been sign	ed and sealed by a l	ficensed surveyor, engineer, or architect who
	rtify elevation information. (Indicate the source and date of to pleted Section E for a building located in Zone A (without a F		
	(Items G4-G10) is provided for community floodplain manage		infullity-issued BPE) of Zone AO.
34, Permit Number			f Compliance/Occupancy Issued
7. This possit has been leaved 5			
7. This permit has been leaved for	The state of the s	<b>-</b>	
BFE or (in Zone AO) depth of t	n 11 - 12 - 1 1 1 1 1 1	J feet ☐ meters	Datum
O. Community's design flood elev		] feet ☐ meters	Datum Datum
		Tion Hiptora	Datum
ocal Official's Name	Title		
community Name	Telephone	3	
ignature	Date		
comments			
			Check here If attachments

# Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 129 Hartsie

Policy Number:

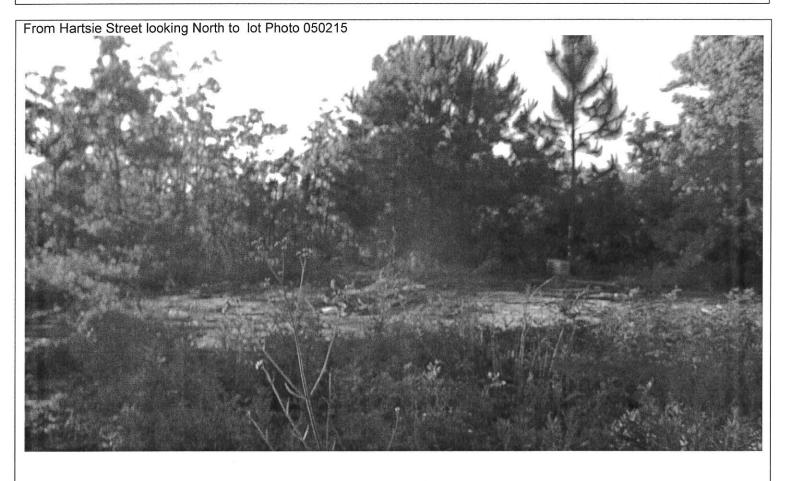
City Waveland

State MS

ZIP Code 39576

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



# **Building Photographs**

Continuation Page

IMPORTANT: I	n these	spaces.	copy th	e corres	pondina	informatio	n from	Section A.
IIIII OITIAITI.	II tilese	spaces,	COPy L	ic corres	ponding	miormatio		Occuon A.

FOR INSURANCE COMPANY USE

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 129 Hartsie

Policy Number:

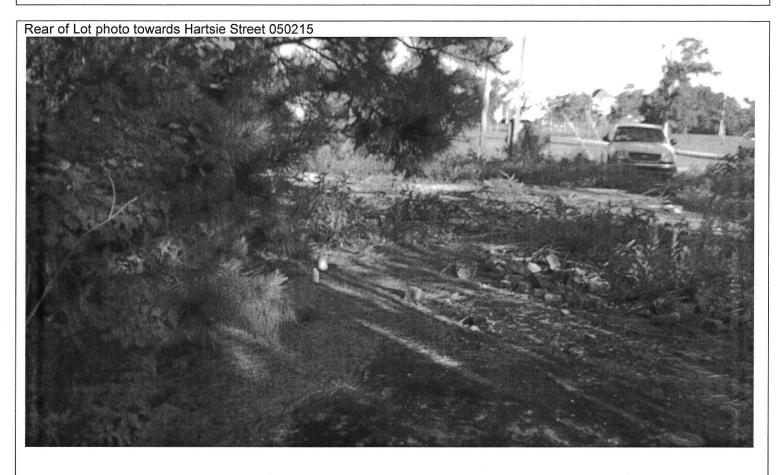
City Waveland

State MS

ZIP Code 39576

Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



#### V-ZONE CERTIFICATE

Name: Donald R. Wheeler

Bullding Address or

Other Description: 129 Hartsie

City: Waveland

Policy Number (Insurance Co. Use):

State: Mississippi

Zip Code: 39576

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community Number: 285262 Panel Number: 28045C-0361 Suffix: D Date of FIRM Index: 10/16/09 FIRM Zone: VE 20

#### SECTION II: Elevation Information

Note: This Certificate does not substitute for an Elevation Certificate

1	Elevation of the Bottom of Lowest Horizontal Structural Member	24.3 feet (NAVD)
2	Base Flood Elevation (BFE)	20.0 feet (NAVD)
3	Elevation of Lowest Adjacent Grade	14.2 feet (NAVD)
4	Approximate Depth of Anticipated Scour/Erosion used for Foundation Design	3.0 feet
5	Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade	8.0 feet
	SECTION III: V-Zone Certification Statement	

Note: This section must be certified by a registered engineer or architect

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used are in accordance with accepted standard of practice for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE; and
- The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Certification Statement

Note: This section must be certified by a registered engineer or architect

When breakaway walls exceed a design safe loading resistance of 20 pounds per square foot

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used for the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:

- Breakaway wall collapse shall result from a water load less than that which would occur during the base flood; and
- The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (wind and water loading values to be used are defined in Section III).

SECTION V: Certification

Signature below certifies: X Section III; Section IV

Certiflers Name: Stuart Williamson, P.E., C.F.M.

Certifiers Name: Stuart Williamson, P.E., C.F.M Title: Civil Engineer

Address; P.O. Box 3145 City: Bay St Lduis

FS No. 5 ~ V-Zone Design and Construction Certification

Company Name: License Number: 13199

State: Mississippi

Date: 05/03/15 Telephone Number

Home Builders Guide to Coastal Construction 08/05

# U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

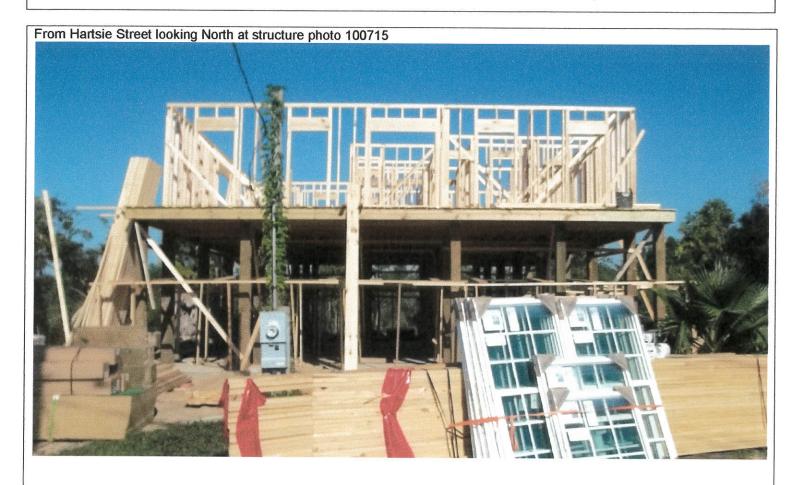
	CTION A - PROPERTY INFOR	MATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name Donald R. Wheeler		Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/o	or Bldg. No.) or P.O. Route and Box	No.	Company NAIC Number:
City Waveland	State MS ZIP Code	39576	
A3. Property Description (Lot and Block Numbers, Tax Parce 161E-0-02-327.000	Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition A5. Latitude/Longitude: Lat. 30.282378 Long. 89.372469 F A6. Attach at least 2 photographs of the building if the Certific A7. Building Diagram Number 5/48. For a building with a crawlspace or enclosure(s):     a) Square footage of crawlspace or enclosure(s) b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade c) Total net area of flood openings in A8.b d) Engineered flood openings?        □ Yes ☑ No	Horizontal Datum: NAD 1927 Exate is being used to obtain flood instant    A9. For a    N/A	building with an attact quare footage of attact umber of permanent to ithin 1.0 foot above act otal net area of flood ngineered flood open	ched garage N/A sq ft flood openings in the attached garage djacent grade N/A sq in openings in A9.b N/A sq in ings?
SECTION B – FLOO	D INSURANCE RATE MAP (FI	RM) INFORMATIO	N
B1. NFIP Community Name & Community Number City of Waveland Mississippi 285262	B2. County Name Hancock	• · · · · · · · · · · · · · · · · · · ·	B3. State Mississippi
B4. Map/Panel Number 28045C0361 B5. Suffix D B6. FIRM Index 10/16/09	Date B7. FIRM Panel Effective/Revised Date 10/16/09	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) dat  ☐ FIS Profile ☐ FIRM ☐ Community De  B11. Indicate elevation datum used for BFE in Item B9: ☐ NG  B12. Is the building located in a Coastal Barrier Resources Sys  Designation Date: N/A	etermined	DFIRM  Other/Source:	☐ Yes ⊠ No
SECTION C - BUILDING	S ELEVATION INFORMATION	SURVEY REQUIR	PED)
C1. Building elevations are based on:  *A new Elevation Certificate will be required when construct  C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1- below according to the building diagram specified in Item A Benchmark Utilized: BH0962  Indicate elevation datum used for the elevations in items a) Datum used for building elevations must be the same as the  a) Top of bottom floor (including basement, crawlspace, or b) Top of the next higher floor  c) Bottom of the lowest horizontal structural member (V Zor	Drawings* ⊠ Building Under tion of the building is complete.  –V30, V (with BFE), AR, AR/A, AR/A, 7. In Puerto Rico only, enter meters Vertical Datum: NAVD88 at through h) below. ☐ NGVD 1929 at used for the BFE.	er Construction*  AE, AR/A1–A30, AR/A	Finished Construction  AH, AR/AO. Complete Items C2.a-h
<ul> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or equipment servicing the (Describe type of equipment and location in Comments)</li> <li>f) Lowest adjacent (finished) grade next to building (LAG)</li> </ul>	e building <u>25.</u>	<u>.                                    </u>	☐ feet ☐ meters ☑ feet ☐ meters ☑ feet ☐ meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>14.</u> :		☑ feet ☐ meters
h) Lowest adjacent grade at lowest elevation of deck or stai	irs, including structural support 14.	3	☑ feet ☐ meters
SECTION D – SURVEY	OR, ENGINEER, OR ARCHITE	CT CERTIFICATIO	N
This certification is to be signed and sealed by a land surveyor, information. I certify that the information on this Certificate represent understand that any false statement may be punishable by fin.  Check here if comments are provided on back of form.  Check here if attachments.  Certifier's Name Stuart Williamson, PE, CFM  Title Civil Engineer  Company Name	esents my best efforts to interpret th	e data available. de, Section 1001. ction A provided by a es ⊠ No	Engineer and Engin
		Codo 20504	- Paris difference
Address P.O. Box 3145 City Bay St. Louis  Signature Date 10/07/15	s State MS ZIP Telephone (228)	Code 39521 243-4066	OF MISSISSIP

ELEVATION CERTIFICAT	E, page 2					
	ces, copy the corresponding inf				FOR INS	SURANCE COMPANY USE
Building Street Address (includin 129 Hartsie	ng Apt., Unit, Suite, and/or Bldg. No.) o	or P.O. Route and Box N	lo.		Policy N	umber:
City Waveland		State MS ZIP Co	ode 39	9576	Compan	y NAIC Number:
SEC.	TION D – SURVEYOR, ENGINEE	R, OR ARCHITECT	CER	TIFICATION (CO	UNITNC	ED)
Copy both sides of this Elevation	Certificate for (1) community official,	(2) insurance agent/com	npany,	and (3) building o	wner.	
Comments Lowest Horizontal S 15.22 NAVD 88	Structural Member exceeds minimum e	elevation requirement. N	linispil	ce in Powerpole di	rectly acr	ross Street from property =
and the state of						
Signature The Signature		Date 10/07/				
SECTION E - BUILDING	<b>ELEVATION INFORMATION (SI</b>	URVEY NOT REQUI	RED)	FOR ZONE AO	AND Z	ONE A (WITHOUT BFE)
<ul> <li>and C. For Items E1–E4, use na</li> <li>E1. Provide elevation informati grade (HAG) and the lowes a) Top of bottom floor (inclub) Top of bottom floor (inclub) Top of bottom floor (inclub) For Building Diagrams 6–9 (elevation C2.b in the diagres.</li> <li>E3. Attached garage (top of slates. Top of platform of machine E5. Zone AO only: If no flood of the control of the co</li></ul>	uding basement, crawlspace, or enclo uding basement, crawlspace, or enclo with permanent flood openings provic rams) of the building is	easurement used. In Pue propriate boxes to show sure) issure) is ded in Section A Items 8 feet meters above or ding is [  If the bottom floor elevation propriate boxes to show the property of the section of the property of the section of the section of the property of the section of the property of the section of the property of the property of the property of the section of the property of the section of the property of t	wheth  f and/o below feet ed in a	co only, enter met er the elevation is feet  meters feet meters for 9 (see pages 8- eve or below the HAG. meters at	above or above or 9 of Instruction HAG.	r below the highest adjacent or □ below the HAG. or □ below the LAG. uctions), the next higher floor □ below the HAG.
	TION F – PROPERTY OWNER (C		-	Post in the section of the section o		
or Zone AO must sign here. The s Property Owner's or Owner's Aut	uthorized representative who complete statements in Sections A, B, and E are horized Representative's Name	e correct to the best of n	ny kno	ne A (without a FE wledge.	:MA-ISSU	ed or community-issued BFE)
Address		City		State	,	ZIP Code
Signature		Date		Teleph	one	
Comments						
						☐ Check here if attachmer
	05051011.0					L_I Check here if attachmer
e local official who is authorized h	SECTION G – COMM by law or ordinance to administer the co				. commist	a Castiana A. D. O (au E) and
this Elevation Certificate. Complet	te the applicable item(s) and sign below	v. Check the measureme	ent use	ed in Items G8-G1	0. In Puer	to Rico only, enter meters.
The information in Section is authorized by law to ce	on C was taken from other documental ertify elevation information. (Indicate t	tion that has been signe he source and date of th	d and ne elev	sealed by a licens	ed surve	yor, engineer, or architect who
2. A community official com	pleted Section E for a building located	d in Zone A (without a Fi	EMA-is	ssued or communi		
	(Items G4–G10) is provided for comm	munity floodplain manag	ement	purposes.		
34. Permit Number	G5. Date Permit Issued	G6.	Date (	Certificate Of Com	pliance/C	Occupancy Issued
7. This permit has been issued f	for: New Construction	Substantial Improvement	ent			
B. Elevation of as-built lowest flo	or (including basement) of the building	15-24 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18-34 18	feet	☐ meters	Datum	
. BFE or (in Zone AO) depth of	flooding at the building site:		feet	☐ meters	Datum	
0. Community's design flood ele-	vation:		feet	☐ meters	Datum	
ocal Official's Name		Title				
community Name		Telephone	10			
ignature		Date				
Comments						
ooiena						Check here if attache

# Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding in	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 129 Hartsie	Policy Number:		
City Waveland	State MS	ZIP Code 39576	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



# **Building Photographs**

Continuation Page

IMPORTANT: In these spaces, copy the corresponding	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. N 129 Hartsie	Policy Number:		
City Waveland	State MS	ZIP Code 39576	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



# U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

Market Walter			SEC	TION /	A – PROPERT	Y INFO	RMATION	FOR	INSURANCE COMPANY USE
A1. B	uilding Owner's Nam	ne Donald R. Wh	Marine Company of the		<del></del>			Name and Address of the Owner, where the Owner, which the Owner, where the Owner, which the	y Number:
A2. Bi	uilding Street Addres	ss (including Apt.	Unit, Suite, and/or	Bldg. N	lo.) or P.O. Rout	e and Bo	x No.	Com	pany NAIC Number:
Ci	ity Waveland	THE PARTY OF THE P		And the second	State MS	ZIP Cod	e 39576		
	roperty Description (I 0-02-327.000	Lot and Block Nu	mbers, Tax Parcel	Number	r, Legal Descript	ion, etc.)	7		
A5. La A6. At A7. Bu A8. Fo a) b)	uilding Use (e.g., Reatitude/Longitude: Lattach at least 2 photo uilding Diagram Number a building with a consequence of Number of perman or enclosure(s) with Total net area of floe Engineered flood of	it. 30.282378 Lographs of the bunder 5 rawlspace or enderawlspace or enderawlspace or endent flood openinghin 1.0 foot above od openings in A	ong. 89.372469 Ho ilding if the Certification losure(s): closure(s) gs in the crawlspace e adjacent grade	orizonta ate is be	I Datum: NA	AD 1927 in flood ir A9. For a) b)	a building with an atta Square footage of att	ached on the state of the state	garage <u>N/A</u> sq ft openings in the attached garage nt grade <u>N/A</u> ngs in A9.b <u>N/A</u> sq in
		SECT	ION B - FLOOD	INSU	RANCE RATE	MAP (F	IRM) INFORMATION	ON	
	IP Community Name Waveland Mississipp		lumber	B2. Co	ounty Name ock	W		B3. S Missi	itate ssippi
	ap/Panel Number 28045C0361	B5. Suffix D	B6. FIRM Index I 10/16/09	Date	B7. FIRM Effective/Rev 10/16/	ised Date	B8. Flood Zone(s) VE	BS	9. Base Flood Elevation(s) (Zone AO, use base flood depth) 20
B12. Is	☐ FIS Profile dicate elevation datu the building located esignation Date: N/A	m used for BFE in a Coastal Barr		VD 1929 em (CB	9 🔲 NA RS) area or Oth	VD 1988	e: <u>DFIRM</u> Other/Source otected Area (OPA)?		☐ Yes   ☑ No
Miller (a projek Wolandersk)		SECTIO	N C - BUILDING	ELEV	ATION INFOR	MATION	I (SURVEY REQUI	RED)	
*A n C2. Elev belo Ben Indio	ow according to the b chmark Utilized: <u>BH</u>	cate will be required A30, AE, AH, A ( building diagram is 10962 In used for the ele	with BFE), VE, V1– specified in Item A7 vations in items a) t	on of the V30, V '. In Pue Vert through	e building is con (with BFE), AR, erto Rico only, e tical Datum: <u>NA</u> h) below. □ No	nplete. AR/A, AF nter mete VD88	rs. } ⊠ NAVD 1988 □ (	//AH, AI	Finished Construction  R/AO. Complete Items C2.a–h  ource:  neasurement used.
a) T	op of bottom floor (ir	cluding baseme	nt, crawlspace, or e	nclosur	e floor)	2	6.9.	⊠ fee	
b) T	op of the next higher	r floor				N	//A	fee	et meters
	ottom of the lowest I ttached garage (top		ral member (V Zone	es only)		99	<u>5.6</u> //A.	⊠ fee	247. A CONTRACTOR CONTRACTOR
e) L	owest elevation of m	achinery or equip		building	g	-	6.9	⊠ fee	" : : : : : : : : : : : : : : : : : : :
f) Lo g) H	Describe type of equi owest adjacent (finis lighest adjacent (finis owest adjacent grade	hed) grade next shed) grade next	to building (LAG) to building (HAG)	s, includ	ding structural su	1	4.2 4.3 4.8	⊠ fee	et meters
landin araban kanasaki ya		SECTIO	N D - SURVEYO	R, EN	GINEER, OR	ARCHIT	ECT CERTIFICATI	ON	
informat  I unders  ⊠ Ch  □ Ch	tion. I certify that the stand that any false s eck here if comment eck here if attachme	information on to statement may be as are provided on ents.	nis Certificate repre e punishable by fine n back of form.	sents m or impi Were	ny best efforts to risonment under latitude and long ed land surveyor	interpret 18 U.S. ( itude in S	Code, Section 1001. Section A provided by Yes  No		WILLIAM WILLIAM Property States of the Proper
	's Name Stuart Willia	amson, PE, CFM		Ch 1.		e Numbe	r 13199		
	vil Engineer s P(0. Box 3145	·	Company Name City Bay St. Louis		Villiamson	MS 7	IP Code 39521		13/99
Signatur	VALLE		Date 01/16/16		Teleph		8) 243-4066		OF MISSISSIP.

ELEVATION CERTIFICATE, page 2	
IMPORTANT: In these spaces, copy the corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 129 Hartsie	Policy Number:
City Waveland State MS ZIP Code 39576	Company NAIC Number:
SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFIC	ATION (CONTINUED)
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and	(3) building owner.
Comments Structure and lowest elevation of equipment and machinery furnishing the residence exceeds Powerpole directly across Street from property = 15.22 NAVD 88	s minimum elevation requirement. Minispike in
Signature Date 01/16/16	
SECTION É - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR	ZONE AO AND ZONE A (WITHOUT BFE)
	aly, enter meters.  e elevation is above or below the highest adjacent  meters □ above or □ below the HAG.  meters □ above or □ below the LAG.  see pages 8–9 of Instructions), the next higher floor  meters □ below the HAG.  HAG.  meters □ above or □ below the HAG.  dance with the community's floodplain management
SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTAT	
The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowled	(without a FEMA-issued or community-issued BFE)
Property Owner's or Owner's Authorized Representative's Name	
Address City	State ZIP Code
Signature Date	Telephone
Comments	
	☐ Check here if attachments
SECTION G – COMMUNITY INFORMATION (OPTIOn local official who is authorized by law or ordinance to administer the community's floodplain management of the local official who is authorized by law or ordinance to administer the community's floodplain management of the local official who is authorized by law or ordinance to administer the community's floodplain management of the local official who is authorized by law or ordinance to administer the community's floodplain management of the local official who is authorized by law or ordinance to administer the community of the local official who is authorized by law or ordinance to administer the community of the local official who is authorized by law or ordinance to administer the community of the local official who is a community of the local official who is	
of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in I	tems G8–G10. In Puerto Rico only, enter meters.
The information in Section C was taken from other documentation that has been signed and sealed is authorized by law to certify elevation information. (Indicate the source and date of the elevation)	data in the Comments area below.)
A community official completed Section E for a building located in Zone A (without a FEMA-issued	
The following information (Items G4–G10) is provided for community floodplain management purp	
G4. Permit Number G5. Date Permit Issued G6. Date Certif	icate Of Compliance/Occupancy Issued
67. This permit has been issued for: New Construction Substantial Improvement	
68. Elevation of as-built lowest floor (including basement) of the building:	meters Datum
69. BFE or (in Zone AO) depth of flooding at the building site:	meters Datum
S10. Community's design flood elevation:	meters Datum
10. Community's design flood elevation: feet  Local Official's Name Title	meters Datum
	meters Datum
Local Official's Name Title	meters Datum
Local Official's Name Title  Community Name Telephone	meters Datum

# Building Photographs See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 129 Hartsie

City Waveland

State MS

ZIP Code 39576

FOR INSURANCE COMPANY USE

Policy Number:

Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

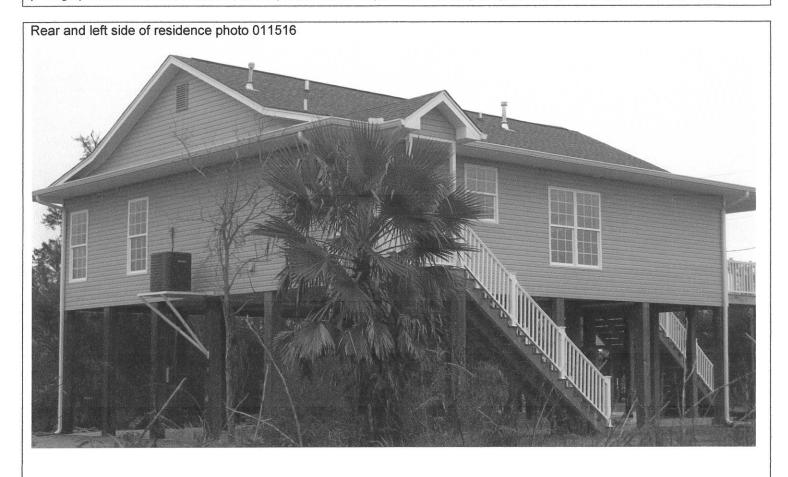




# Building Photographs Continuation Page

IMPORTANT: In these spaces, copy the correspond	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suite, and/or Bldg 129 Hartsie	Policy Number:			
City Waveland	State MS	ZIP Code 39576	Company NAIC Number:	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



2016 1695
Recorded in the Above
Deed Book & Page
02-11-2016 09:29:14 AM
Timothy A Kellar
Hancock County

# WAVELAND

# NONCONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 29 day of bornary, 20 16, by Donal & Wheeler ("Owner") having an address at 129 Hartsie DR. Waveland, MS 39576	
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at WHEREAS, the Owner is the record owner of all that real property located at IZ9 HATSIE DR in the City of Waveland, Ms. in the County of Hancock, designaled in the Tax Records as 1615:0-02-321.002	200
WHEREAS, the Owner has applied for a permit to place a structure of that property that the structure of the	Con the married
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.  Hancock County I certify this instrument as the	14 14 Same
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:  02-11-2016 09:29:14 Affine and recorded in Deed Book	3
1. The structure or part thereof to which these conditions apply is:  2016 at pages 1695 - 1695  Limsthy A Kellar	To the same
2. At this site, the Base Flood Elevation is 20 feet above mean sea level, National Geodetic lar Vertical Datum.	4
Vertical Datum.  3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited astorage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.	
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.	
<ol><li>The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.</li></ol>	
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.	
7. Other conditions:	
OF MISSISSING	
In witness whereof the undersigned set their hands and seals this 29 day of 20 M, 20 M, 20 M NO. 78529	
Donald R. Wheeler (Mly Affrica) Commission Expires	
Withess  We (Seal)  Owner  Withess	
O THIS	

# Hancock County Chancery Clerk Instrument Recording Receipt

Book: Deed Inst: Agreement Book/Page: 2016 / 1695 Ref: DONALD R WHEELER 1009

Archiver Record Man: Deed Recording Fee Total Fees :	gement \$	1.00 11.00 0.00 12.00
Total Due : Checks Paid: Total Paid :	# #	12.00 12.00 12.00
Change Due :	\$	0.00
Have a Nice Day Timothy A Kellar		

Timothy A Kellar

Term/Cashier: RM175-03-9MFQDQ / KATIE

Tran: 11199.155453.187342 Printed: 02-11-2016 09:29:14 AM